Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name JIMMY JOHN'S #1139 Address 3001 CHARLESTOWN CROSSING WAY, NEW ALBANY Owner 83 SUBS, LLC/ JAY PAGE Owner's Address 5308 ROCK RIDGE DR LOUISVILLE, KY 40241- Person in Charge AMAYA RUSSELL							Telephone Number 812-725-8580 n 617-519-3355 Purpose X Routine Follow-up Complaint Pre-Operational	Date of ID# ID# Inspection 04/19/2024 Follow Up Released 04/29/2024		
Responsible Person's Email							Temporary	Menu Type		
JAY@PAGEQ							HACCP	1 _ 2 <u>X</u> 3 _	4 _ 5 _	
Certified Food Handler HEATHER RAINS							Other (list)			
				AND NARRATIVE COLUMN NS ARE DENOTED IN THE		S" AND IN THE N	ARRAIVE COLUMN MARKED AS "R"			
Section #	C	NC	R	Narrative		To Be Corrected				
				ATMOSPHERI CONSTANT PE FAUCET OR C	C VACUUM BREARESSURE. FCHD ONNECTING TH	AKER ON RECOMM E DISPENS	D LINE TO A CHEMICAL THE FAUCET IS NOT DE ENDS INSTALLING A BI SER TO AN INDEPENDE BETWEEN USES IN THE	ESIGNED FOR LEEDER VALVE TO NT WATER LINE. TH		
Summary of V Received by (n					<u>1</u> R <u>1</u>		nspected by (name and title	1 e printed):	_	
JAY PAGE							Carrie Fischer EHS			
Received by (signature):						I	Inspected by (signature):			
cc:					ce:			cc:		